



Positive Positive Story and Photos by Heike Hasenauer

SG Shannon Brown of Tripler Army Medical Center's Company A in Honolulu, Hawaii, waited in a stark classroom — a designated holding area behind the hospital — for the Unit Prevention Leader to call his name.

When she did, Brown handed her his ID card, confirmed some personal statistics and removed his uniform jacket to show nothing was concealed underneath. She handed him a bottle, had him affix his Social Security number to it and sent him down the hall, shadowed by a designated observer, to provide a urine sample, in a designated, previously checked latrine.

The procedure happens every day somewhere across the Army. And somewhere, soldiers are sweating the impending consequences of what they did a night or two before.

Consequences for Users

Army policy dictates that all soldiers who test positive for drugs will be processed for separation, said MSG Kimberly Henry of the Army Center for Substance Abuse Programs in Alexandria, Va., the office that establishes policy guidance for the Army's substance-abuse prevention program.

Commanders may consider a soldier's rank and military record, and show more tolerance for lower-ranking soldiers whose urinalysis comes up positive than they do for career officers.





Designated observers play a critical role in the collection process. The observer is responsible for the integrity of the urine specimen, and must actually watch the urine leave the soldier's body.





In determining a soldier's fate, commanders also consider behavior — such as theft, violence and drug dealing — that may have been related to the drug use, said MAJ Timothy Lyons, commander of TAMC's Forensic Toxicology Drug Testing Laboratory. The bottom line is "there has to be a penalty for drug use if you're going to have a deterrence program," he said.

"At my level, I must initiate action to separate soldiers who have positive urinalysis reports," said CPT James Joyner III, commander of TAMC's Co. A. "But my superiors determine whether or not to eliminate soldiers or rehabilitate them, according to guidance provided in Army Regulation 600-85."

Of 410 soldiers in Joyner's company, four tested positive for drugs last year — three had used marijuana and one had abused prescription drugs.

Drug-Use Statistics

While records indicate an overall positive rate of one percent for active-duty soldiers in 2000, the percentage has been slightly higher over the past three years, at 1.3 percent, Lyons said. It doesn't sound like much, but more than 9,000 active-duty soldiers are discharged every year - roughly half of a division — for illicit drug use.

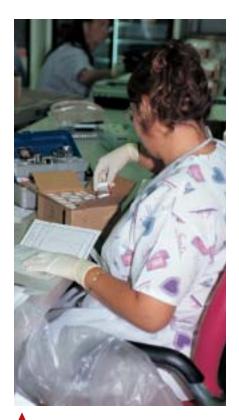


Their drug use might very well have affected not only their own performance of duties but other soldiers' performance as well, Lyons said.

Despite changes to the testing system since the 1970s, the drug of choice hasn't changed. It's still

SSG April Norton, the Unit Prevention Leader for TAMC's Co. A, performs necessary administrative checks before urine specimens are boxed and sealed.

The FTDTL is not only responsible for testing for drugs, but also for generating legal documents and providing expert witnesses at boards and court-martial proceedings.



To help ensure accurate and reliable test results, workers in TAMC's drug-testing laboratory compare computer printouts with the information on the labels affixed to the specimen bottles.

marijuana, said Lyons. It's followed by cocaine, amphetamines (including methamphetamines) and ecstasy. And 18- to 22-year-old soldiers are most likely to abuse the drugs, with the highest incidence of drug use found in new recruits at Military Entrance Processing Centers.

Lyons said young soldiers are easily tempted because marijuana and other drugs are readily available and relatively inexpensive.

Urinalysis Procedures

Under the Defense Department's Alcohol and Drug Abuse Prevention Program, individual commanders determine when to test their soldiers. "It's their program," Lyons said.

Some commanders choose to test at 100 percent, Henry said, because random testing of only a percentage of soldiers can mean that some soldiers are tested repeatedly and others aren't tested at all.

Whether the tests are conducted on a monthly or bimonthly basis, or less frequently, and include an entire unit or a percentage of the unit, the time sequence cannot be predictable, Henry said.

The urinalysis process begins when a unit commander notifies his Unit Prevention Leader that he'd like to conduct a drug test. Every unit has a UPL, who must be an NCO, Joyner said.

The UPL performs the function as an additional duty. If the commander elects to test 10 percent of his soldiers, the UPL would identify them through a computer printout and notify the soldiers on the "hit list" no more than two hours before the test, Joyner said.

A stringent process follows, from the moment the soldier enters a holding area, where administrative checks are performed, to the time the filled specimen bottle is returned to the UPL, said SSG April Norton, UPL for TAMC's Co. A.

The designated observer plays a critical role in the procedure, Norton said. Because the observer is responsible for the integrity of the urine sample, he must actually watch the urine leaving the soldier's

body, Henry added.

When a sample is returned to Norton, she checks it to be sure it's warm and that there's been no tampering with the bottle cap. She seals the bottle and initials it, and the observer signs a unit ledger, which can be used in legal proceedings as sworn affidavit that he observed the soldier urinate in the bottle, Henry said.

Samples are boxed and delivered by the UPL to the Army Substance Abuse Program, ASAP. In Hawaii, that office is located at Schofield Barracks. There the Social Security number and other information is again checked, the boxes of specimens are sealed and numbered to indicate the regions from which they originated, and the UPL again initials the box.

"We then take custody of the samples," said Domie Tuazon, assistant ASAP program coordinator. "We keep a log of the boxes and place them in locked storage until a driver picks them up to deliver to the drug-testing lab."

The FTDTL at Tripler

The lab is one of only two drugtesting labs Armywide. As such, it tests urine specimens for all Army units west of the Mississippi River, all Army National Guard units, wherever they're located, and Fort Bragg, N.C., said Lyons.

A lab at Fort Meade, Md.,

The turnaround time for a specimen report is typically three days, or six days when a urine sample tests positive for drugs.



In FTDTL's specimen-processing area, workers pour the urine into tubes, which are then placed in the screening analyzer. The device can perform an initial screening on up to 7,000 specimens per hour.

analyzes urine specimens from Army units east of the Mississippi and all Army Reserve units, plus those from Department of the Army civilians worldwide, he said.

Together, the two labs test some 2.6 million specimens annually, Lyons said. And the turnaround time for a specimen report is typically three days, or six days when a urine sample tests positive for drugs. In the latter case, tests are repeated and performed on more concentrated levels of the urine sample.

For Lyons and 70 civilian pharmacologists, chemists, medical technologists and technicians, the intensive urinalysis process — something that was the topic of debate, ridicule, even humor when the program began during the Vietnam era — is serious business, he said. A mistake made in the lab could cost a soldier his career.

The FTDTL is not only responsible for testing urine samples for drugs, but also for generating legal documents and providing expert witnesses at boards and court-martial proceedings.

"We testify in about five cases per month," Lyons said.

Most of the time, soldiers attempting to vindicate themselves will suggest that someone else put something in their drinks, Lyons said.

Protecting the Soldier

Positive samples are kept for one year as evidence, if needed, in court proceedings, Lyons said. The soldier whose career may be on the line can request that his sample be retested at the TAMC lab, another DOD lab, or a civilian lab anywhere in the world, the latter at the soldier's expense.

"If there's ever any doubt about a sample — for example, one digit in a Social Security number isn't legible — we'll err on the side of the soldier," Lyons said. "Every possible measure is taken to protect the soldier."

Under the lab's quality-control program, experts regularly test computerized systems to ensure that instruments such as the screening analyzer, which performs an initial screening of 7,000 specimens per day, are working properly, Lyons said. Additionally, external, weeklong evaluations of the lab are conducted quarterly.

To eliminate any question of employee tampering or interference by unauthorized visitors, cameras are situated in the parking lot outside FTDTL, at all entrances to the facility and in all laboratory work areas. They operate 24 hours a day to provide daily digital recordings. A swipe-card security system is also in place to ensure that only authorized personnel gain access to the facility.

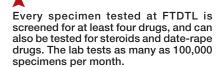
Finally, to preclude any tampering with test results, Web-based reporting has replaced e-mail and "real mail," Lyons said.

What may appear to be overkill has resulted in 100 percent accuracy of test results at TAMC. "We've never reported a false positive," Lyons said.

Laboratory Analysis

DOD Directive 10101.16 outlines technical requirements for the actual lab analysis process that can isolate





seven major classes of drugs, Lyons said. Every urine specimen examined at FTDTL is tested for at least four drugs.

"We can also test for steroids and date-rape drugs," said Lyons. The lab, which tested roughly 20,000 samples monthly in 1993, now tests as many as 100,000 per month.

Paving the Way for Change

The FTDTL at TAMC was scheduled to become the first tri-service drugtesting lab in October, in a pilot program to determine whether the joint services' laboratories should all become tri-service labs, Lyons said.

Currently the Air Force and Navy send samples to labs in San Antonio, Texas, and San Diego, Calif., respectively. Those include samples taken from airmen at both Hickam Air Force Base and Pearl Harbor on Oahu, about 10 miles from the TAMC facility. **≅**



The goal of FTDTL's rigorous testing process is to ensure that all test results are accurate and complete. This helps prevent errors and protects soldiers against false positives.